

P14 000079314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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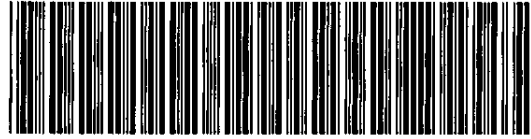
(Business Entity Name)

(Document Number)

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9/25/14  
ms*





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 28, 2014

SANDRA LAMBERT  
20708 SOUTH RD  
ALTOONA, FL 32702

SUBJECT: JOE LAMBERT ROOFING INC  
Ref. Number: W14000052825

We have received your document for JOE LAMBERT ROOFING INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The purpose contained in your articles should be more specific.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Carol Mustain  
Regulatory Specialist II

Letter Number: 414A00018522

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: JOE LAMBERT ROOFING INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

20708 SOUTH RD

ALTOONA, FL 32702

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FOR PROFIT: A LEGAL ENTITY

ROOF INSTALLATION AND/OR REPAIR

HANDY MAN REPAIRS

COMMERCIAL CLEANING

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SANDRA LAMBERT PRESIDENT Name and Title: JOE L LAMBERT VP

Address: 20708 SOUTH RD Address: 20708 SOUTH RD

ALTOONA, FL 32702 ALTOONA, FL 32702

Name and Title: Name and Title:

Address: Address:

Name and Title: Name and Title:

Address: Address:

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Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: SANDRA LAMBERT

Address: 20708 SOUTH RD

ALTOONA, FL 32702

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: SANDRA LAMBERT

Address: 20708 SOUTH RD

ALTOONA, FL 32702

***Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity***

*Sandra Lambert*

Required Signature/Registered Agent

8/25/2014

Date

***I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.***

*Sandra Lambert*

Required Signature/Incorporator

8/25/2014

Date